

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Abdomohamad ROSTAMI *et al.*

Application No.: 09/943,688

Group Art Unit: 1265

Filed: 08/31/2001

Examiner: M.C. Flood

Title: Use Of Bowman Birk Inhibitor For The Treatment Of Ms And Other Autoimmune Diseases

Mail Stop Fee
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450



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SUBMISSION OF CORRECTED FORMAL DRAWINGS

Sir:

Transmitted herewith are three (3) sheets of formal drawings, FIGS. 4, 5, and 8, to be substituted for the corresponding drawing sheets presently on file in the above-identified application.

The new drawing sheets incorporate the changes requested by the Official Draftsperson on Form PTO-948 attached to the Office Action mailed December 3, 2002.

In the event any fees are required in connection with this paper, please charge Deposit Account No. 50-0979. A copy of this document is enclosed.

Applicants' undersigned attorney may be reached by telephone at (215) 575-7034. All correspondence should be directed to the below-listed address.

Respectfully submitted,

Evelyn H. McConathy
 Evelyn H. McConathy
 Registration No. 35,279

Date: May 28, 2003
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 1735 Market Street
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 497196_1

05-19-03
Please type a plus sign (+) inside this box →

GP 1265
PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

\$1654



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	Application Number 09/943,688
	Filing Date 08/31/2001
	First Named Inventor Abdomohamad Rostam
	Group Art Unit 1265 (1654)
	Examiner Name M.C. Flood
	Attorney Docket Number 22253-69814

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ENCLOSURES (check all that apply)

- Fee Transmittal Form
 - Fee Attached
- Amendment/Reply
 - After Final
 - Affidavits/declaration(s)
- Extension of Time Request
 - Express Abandonment Request
 - Information Disclosure Statement
 - Certified Copy of Priority Document(s)
 - Response to Missing Parts/Incomplete Application
 - Response to Missing Parts under 37 CFR 1.52 or 1.53

- Assignment Papers
(for an Application)
- Drawing(s) – Figs. 4, 5 and 8
- Licensing-related Papers
- Petition
- Petition to Convert to a Provisional Application
- Power of Attorney, Revocation Change of Correspondence Address
- Terminal Disclaimer
- Request for Refund
- CD, Number of CD(s)

- After Allowance Communication to Group
- Appeal Communication to Board of Appeals and Interferences
- Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief)
- Proprietary Information
- Status Letter
- Other Enclosure(s)
(please identify below):
Submission of Corrected Formal Drawings; copy of return receipt card and IDS filed 07/10/2002 w/Form PTO-1449 & references cited therein; check for \$465.00 (3 mo. EOT)

Remarks:

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Evelyn H. McConathy, Reg. No. 35,279
Signature	
Date	May 28, 2003

CERTIFICATE OF EXPRESS MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with Express Mail Label No. EV222867376US in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313 on this date: May 28, 2003.

Typed or printed name	Michelle D. Sebastian
Signature	
	Date: May 28, 2003

OCT 14 JC83
MAY 28 2003
PATENT & TRADEMARK OFFICEEE TRANSMITTAL
for FY 2003

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$465.00)

METHOD OF PAYMENT (check all that apply)

Complete if known

Application Number 09/943,688

Filing Date 08/31/2001

First Named Inventor Abdomohamad Rostami

Examiner Name M.C. Flood

Group Art Unit 1265

Attorney Docket No. 22253-69814

FEE CALCULATION (continued)

 Check Credit Card Money Order Other None Deposit Account:

Deposit Account Number 50-0979

Deposit Account Name Dilworth Paxson LLP

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments Charge any additional fee required under 37 CFR 1.16 and 1.17 Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

3. ADDITIONAL FEES

Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65 Surcharge – late filing fee or oath	
1052	50	2052	25 Surcharge – late provisional filing fee or cover sheet	
1053	130		Non-English specification	
1812	2,520		For filing a request for <i>ex parte</i> reexamination	
1804	920*		Requesting publication of SIR prior to Examiner action	
1805	1,840*		Requesting publication of SIR after Examiner action	
1251	110	2251	55 Extension for reply within first month	
1252	410	2252	205 Extension for reply within second month	
1253	930	2253	465 Extension for reply within third month	465
1254	1,450	2254	725 Extension for reply within fourth month	
1255	1,970	2255	985 Extension for reply within fifth month	
1401	320	2401	160 Notice of Appeal	
1402	320	2402	160 Filing a brief in support of an appeal	
1403	280	2403	140 Request for oral hearing	
1451	1,510		Petition to institute a public use proceeding	
1452	110	2452	55 Petition to revive – unavoidable	
1453	1,300	2453	650 Petition to revive – unintentional	
1501	1,300	2501	650 Utility issue fee (or reissue)	
1502	470	2502	235 Design issue fee	
1503	630	2503	315 Plant issue fee	
1460	130		Petition to the Commissioner	
1807	50		Processing fee under 37 CFR 1.17(q)	
1806	180		Submission of Information Disclosure Stmt	
8021	40		Recording each patent assignment per property (times number of properties)	
1809	750	2809	375 Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810	375 For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801	375 Request for Continued Examination (RCE)	
1802	900		Request for expedited examination of a design application	

Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$465

2. EXTRA CLAIMS FEES FOR UTILITY AND REISSUE

				Fee from below	Fee Paid
				Extra Claims	
Total Claims	*	-20**	=	0 X * =	\$ 0
Independent Claims	*	- 3**	=	0 X * =	\$ 0
Multiple Independent				+ 280/140=	\$ _____

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee Code	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 0

**or number previously paid, if greater; For Reissue, see above

SUBMITTED BY CUSTOMER NO. 27730

Complete (if applicable)

Name (Print/Type)	Evelyn H. McConathy	Registration No. (Attorney/Agent)	35,279	Telephone	(215) 575-7000
Signature	Evelyn H. McConathy			Date	May 28, 2003

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